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FACSIMILE COVER SHEET

OCT 17 2008

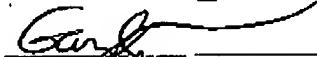
Deliver to: MURDOUGH, Joshua A., USPTO Art Group: 3621
 Facsimile No.: (571) 273-8300 Date: October 17, 2008
 From: Dermot G. Miller, Reg. No. 58,309
 Our Docket No.: 6570P007 Number of pages 31 including this sheet.
 Application No.: 10/723,723 Filing Date: 11/26/2003
 Docket Due Date(s): 10/17/2008

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Response</u> (<u>24</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (<u> </u> pgs)	<input type="checkbox"/> Notice of Appeal (in duplicate)
<input type="checkbox"/> Application: <u> </u> (<u> </u> pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: <u> </u>
<input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs)	<input type="checkbox"/> Request for Continued Examination (RCE) (in duplicate)
<input type="checkbox"/> Certificate of: <u> </u>	<input type="checkbox"/> Reply Brief (<u> </u> pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (<u> </u> pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input checked="" type="checkbox"/> Drawings: <u>3</u> sheets, <u>3</u> figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: <u> </u>	<input type="checkbox"/> Response to Written Opinion (<u> </u> pgs)
<input checked="" type="checkbox"/> Fee Transmittal	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other: <u> </u>	<input checked="" type="checkbox"/> Transmittal Letter

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 Gayle Bekish

10/17/2008

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/723,723
		Filing Date	November 26, 2003
		First Named Inventor	Dr. Eugene Sindambiwe
		Art Unit	3621
		Examiner Name	MURDOUGH, Joshua A.
Total Number of Pages in This Submission		Attorney Docket Number	6570P007

ENCLOSURES (check all that apply)

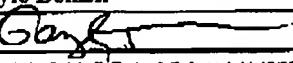
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s): (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<i>Return Postcard</i>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	<i>fax Cover sheet</i>
<input type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Dermot G. Miller, Reg. No. 58,309 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP		
Signature			
Date	October 17, 2008		

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Gayle Bekish		
Signature		Date	October 17, 2008

Based on PTO/SB/21 (10-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 10/05/2007.
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FEE TRANSMITTAL
for FY 2007

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known	
Application Number	10/723,723
Filing Date	November 26, 2003
First Named Inventor	Dr. Eugene Sindambiwe
Examiner Name	MURDOUGH, Joshua A.
Art Unit	3621
Attorney Docket No.	6570P007

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Credit any overpayments
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	<input checked="" type="checkbox"/> Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.	

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims		Extra Claims		Fee from below		Fee Paid
Independent Claims	50	50*	=	0	X	52.00 = \$0.00
Multiple Dependent	5	5*	=	0	X	220.00 = \$0.00

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	52	2202	28	Claims in excess of 20
1201	220	2201	110	Independent claims in excess of 3
1203	390	2203	195	Multiple Dependent claim, if not paid
1204	330	2204	165	"Reissues independent claims over original patent
1205	330	2205	165	"Reissues claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

*or number previously paid, if greater. For Reissues, see below

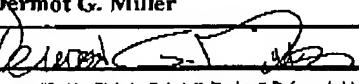
2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or auth	_____
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	_____
2053	130	2063	130	Non-English specification	_____
1251	130	2251	65	Extension for reply within first month	_____
1252	490	2252	245	Extension for reply within second month	_____
1253	1,110	2253	555	Extension for reply within third month	_____
1254	1,730	2254	665	Extension for reply within fourth month	_____
1255	2,350	2255	1,175	Extension for reply within fifth month	_____
1401	540	2401	270	Notice of Appeal	_____
1402	540	2402	270	Filing a brief in support of an appeal	_____
1403	1,080	2403	540	Request for oral hearing	_____
1451	1,510	2451	1,510	Petition to institute a public use proceeding	_____
1460	130	2460	130	Petitions to the Commissioner	_____
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	_____
1808	160	1806	180	Submission of Information Disclosure Stmt	_____
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.120(b))	_____
1810	610	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	_____
Other fee (specify)		SUBTOTAL (2)		(\$)	_____

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Dermot G. Miller	Registration No. (Attorney/Agent)	58,309	Telephone	(503) 439-8778
Signature				Date	10/17/08

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 02/26/2007.

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